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APPLICANTS

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** CONTINUING DATA ** *N* *CIAN*

** FOREIGN APPLICATIONS ** *N* *CIAN*

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>CIAN</i>	STATE OR COUNTRY TX	SHEETS DRAWING 8	TOTAL CLAIMS 28 4	INDEPENDENT CLAIMS 10
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TITLE

METHOD AND APPARATUS FOR ENCODING TRANSACTIONS FOR GOODS AND SERVICES USING AN E-RECEIPT

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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